

Sen. Gerrantana, Representative Ritter and member of the committee. I am here to support Raised Bill 294, AAC Services for Individuals with Intellectual Disability.

In a system demonstrably unable to deliver necessary services, the situation is worsened when too many of its activities are a mystery to its clients. This bill improves the situation, although it is not perfect.

First, the definition of what constitutes the waiting list is illogically truncated by Section 1(c) to only include those deemed urgent. This has the potential to do real, and completely avoidable, damage.

Right now, DDS reports Emergencies- which In December, 2015 totaled 32 individuals (a long time designation that the proposed bill, for no apparent reason, changes to "Urgent") P1 (needing placement within a year. totaling 899), and a planning list for those with less exigent needs (totaling 1148 people).

The total of all of these comprises what advocates call the waiting list of 2047 people. DDS is quite upfront and transparent about this. And for the purposes of assessing both where we are and where we need to go, this is a valuable planning tool. For DDS, for OPM, for you, for advocates and for families.

But the proposed bill would so dramatically change the definition that the waiting list becomes meaningless. Instead of 2047 people, it would be limited to the 32 who are now called Emergencies, or under the new language, "Urgent." Ask yourselves how anyone is better off with this change?

The second problem with the proposed bill list that DDS is only required (by Section 1(d)) to update the waiting list once every three years. It currently does this four times per year. There is no public policy rationale that I can envision that justifies less transparency and less information to the public and to other policy makers. Accordingly, I urge you to remove this and permit DDS to continue doing what it has been doing for years.

I also note that, for a variety of factors, including staggering inefficiencies on the public side, DDS now has new waiting lists, including a waiting list for critical day programs. The proposed bill does not address this and should. Again, we will never get where we need to be unless we know where we are. If there is a growing waiting list for day, or other services, then we all should know about it so that we can attempt to address the issue.

Section 1(c) also calls for the one time- as in once ever- notification of priority status and their budget. This is not enough. Things change constantly. It is interesting that the massive Social Security Administration manages to notify each of its beneficiaries, annually, of their budget and of any change. The same should apply to DDS. Information, especially when the government appears to be in retreat when it comes to critical social services, is key.

Finally, there is nothing in the proposed bill that addresses one of the most important complaints we hear. That is, when DDS makes the decision on a request for services, the family gets what amounts to a thumbs up or thumbs down, without explanation or the documentary evidence that supports that decision. This is unacceptable.

I first want to acknowledge that the Administration has placed good people at DDS in an impossible and unfair situation. Lacking sufficient funding- for a variety of reasons, including the failure of political will to transfer funding to places where so many more could be helped within available appropriations- good people at DDS are forced to say no when, with every fiber of their beings, they want to say yes. And, I'm guessing, in more than a few cases, know that the circumstances justify their saying yes.

I ask that the bill be amended to include a requirement that any DDS funding decision be in writing, give an understandable explanation for the decision, and the right of the affected party to examine the evidence relied upon to reach that decision.